03039667

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	OMB A	APPRO	VAL	

OMB Number: 3235-0076

Expires:

May 31, 2005

, u. u. u
E ONLY
Serial
CEIVED

Name of Offering (check if this is an a LongView Partners B, L.P. Limited			ndicate change	e.)	
Filing Under (Check box(es) that apply): Type of Filing: New Filing	Rule 504 Amendment	Rule 505	⊠ Rule 5	06 Section 4(6	ULOE
	A. BAS	IC IDENTIFICA	TION DATA		English to the second
1. Enter the information requested about	the issuer				
Name of Issuer (check if this is an ame LongView Partners B, L.P	endment and name has	s changed, and indi	cate change.)	A	DEC 04200.3
Address of Executive Offices 1114 Avenue of the Americas, New	•	and Street, City, Sta	ate, Zip Code)	Telephone Number (Inc. (212) 536-9700	luding Area Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number a	and Street, City, Sta	ate, Zip Code)	Telephone Number (Inc.	uding Area Code)
Brief Description of Business Private Inv	estment Fund				
	eartnership, already fo cartnership, to be forn		ner (please spe	cify):	PROCESSE DEC 0.9 2003
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organizat	ion: (Enter two-le	Month Year 09 96 etter U.S. Postal Ser da: FN for foreign			THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97) 1 of

		A. BASIC I	DENTIFICATION DAT	r A					
2. Enter the information req	juested for the	following:							
· Each promoter of th	ne issuer, if the	issuer has been organize	d within the past five years	s:					
·	 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of 								
the issuer;	ioi naving inc	power to vote or dispose	, or another vote or alsp	, vi, 107	or more of a class of equity securities of				
· Each executive office	er and director	r of corporate issuers and	of corporate general and	managing partne	ers of partnership issuers; and				
· Each general and ma	anaging partne	r of partnership issuers.							
Check Box(es) that Apply: General Partner	Promoter	Beneficial Owner	Executive Officer	☐ Director	☑ General and/or Managing Partner				
Full Name (Last name first, if	f individual)								
LongView B GP LLC									
Business or Residence Address	-		Code)						
1114 Avenue of the Amer									
Check Box(es) that Apply: *Managing Member of the		Beneficial Owner Partner	Executive Officer	☐ Director	★ General and/or Managing Partner				
Full Name (Last name first, if	f individual)								
Wilcox, Bruce G.									
Business or Residence Address	•		Code)						
1114 Avenue of the Amer		·	<u></u>						
Check Box(es) that Apply: *Managing Member of tl			Executive Officer	☐ Director	★ *General and/or Managing Partner Managing Partner Managing Partner **Transpart of the properties of the prop				
Full Name (Last name first, if		ai thei	·		Nanaging Lattici				
Wallach, Andrew M.	marviduary								
Business or Residence Address	ss (Number an	d Street, City, State, Zip	Code)						
1114 Avenue of the Amer	,		,						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director					
*Managing Member of the	he General P	artner			Managing Partner				
Full Name (Last name first, if	individual)								
Tynes, Gary G.									
Business or Residence Address		· · · · · · · · · · · · · · · · · · ·	Code)						
1114 Avenue of the Amer		- <u></u>							
Check Box(es) that Apply: *Member of the General	Promoter	Beneficial Owner	Executive Officer	☐ Director	★General and/or Managing Partner				
Full Name (Last name first, if					Wanaging Faither				
Rifkin, Lawrence M.									
Business or Residence Address 1114 Avenue of the Amer	•	• •	Code) 						
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	ss (Number and	d Street, City, State, Zip	Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if	`individual)								
Business or Residence Address	ss (Number and	d Street, City, State, Zip	Code)	· 					
	(Use bl	ank sheet, or copy and us	se additional copies of this	sheet, as necess	sary.)				

		13-14	in in the second			B. INFOR	MATION	ABOUT	OFFERI	NG	i jez				
1.	Has the iss	uer sold, or	does the is	suer inten	d to sell, to	non-accre	edited inve	stors in th	is offering	?				Yes	No
	Answer also in Appendix, Column 2, if filing under ULOE.							Ц							
	2. What is the minimum investment that will be accepted from any individual								\$ <u>1,000,0</u>	<u>00*</u>					
3.	*(the General Partner may, in its sole discretion reduce the size of a minimum purchase)							Vac	No						
J.	Does the offering permit joint ownership of a single unit?								No						
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated														
													aler. If more		
	than five (to be listed	l are assoc	iated pers	ons of suc	h a broker	or dealer,	you may	set forth t	he inform	ation for th	nat broker or		
Full	Name (Last		if individu	ıal)	 				·		· ·· ·				
Bus	iness or Res	idence Add	ress (Numi	per and Str	eet, City, S	State, Zip (Code)								
Nan	ne of Associ	ated Broker	or Dealer	•••											
C4-4	:- \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	D I :	- 1 II C - 1	l' - ' T		1-11-7-D	-1								
State	es in Which	Person List	ed Has So	ncited or i	ntends to s	Solicit Puro	cnasers								
	(Chec	k "All State	s" or checl	c individua	ıl States)		***************************************	•••••					•••••	🔲 All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI] '	[ID]		
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wvj	[wɪ]	[WY]	[PR]		
Full	Name (Last	name first,	if individu	al)				,							
Bus	iness or Res	dence Add	ress (Numb	per and Str	eet, City, S	State, Zip (Code)								
Nan	ne of Associ	ated Broker	or Dealer												
State	es in Which	Person List	ed Has Sol	icited or I	ntends to S	Solicit Purc	hasers					. .			
	(Chec	k "All State	s" or checl	c individua	l States)									🗌 All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	(FL)	[GA]	[HI]	[ID]		
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full	Name (Last	-													
Busi	iness or Resi	dence Addi	ress (Numb	oer and Str	eet. City. S	State. Zin (Code)								
			Cos (Traine	ver and ou		эш. с , длр (<i>3040)</i>								
Nan	ne of Associa	ated Broker	or Dealer												
State	es in Which	Person List	ed Has Sol	icited or I	ntends to S	Solicit Purc	hasers					· · · · · · · · · · · · · · · · · · ·			
(Check "All States" or check individual States)								🗌 All	States						
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[КҮ] [NЛ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt Equity Common Preferred Convertible Securities (including warrants) \$66,525,689 Partnership Interests \$200,000,000 Other (Specify ___ Total..... \$200,000,000 \$66,525,689 Answer also in Appendix, Column 3, if filing Under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings Under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." 2. Aggregate Dollar Amount of Number Investors Purchases Accredited Investors.... \$66,525,689 Non-accredited Investors..... Total (for filings Under Rule 504 only) Answer also in Appendix, Column 4 if filing under ULOE If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of Dollar Amount Security Sold Rule 505 Regulation A Rule 504

	C. OFFERING PRICE, NUMBER OF I	NVESTORS, EXPENSE:	S AND USE	OF PROCEE	DS	
	b. Enter the difference between the aggregate offering to Part C - Question 1 and total expenses furnished Question 4.a. This difference is the "adjusted gross pro	in response to Part C -			\$ <u>200,000,000</u>	
5.	Indicate below the amount of the adjusted gross proce proposed to be used for each of the purposes shown, purpose is not known, furnish and estimate and check estimate. The total of the payments listed must exproceeds to the issuer set forth in response to Part C - C	If the amount for any the box to the left of the qual the adjusted gross	Óff Direc	nents to icers, tors, & iliates	Payments To Others	
	Salaries and fees	•••••	\$		\$	
	Purchase of real estate		S		S	
	Purchase, rental or leasing and installation of machiner	y and equipment	\$		\$	
	Construction or leading of plant buildings and facilities	5	\$		\$	
	Acquisition of other businesses (including the value involved in this offering that may be used in exchange of securities of another issuer pursuant to a merger)	e for the assets	□ \$		□ \$	
	Repayment of indebtedness		□ \$		\$	
	Working capital		\$		_ 🗆 \$	
	Other (specify) Investment Capital		□ \$		⊠ \$ <u>200,000,000</u>	
	Column Totals Total Payments Listed (column totals added)		<u> </u>		∑ \$ <u>200,000,000</u> 00,000,000	
•	D. FEDI	ERAL SIGNATURE				
followin	uer has duly caused this notice to be signed by the unding signature constitutes an undertaking by the issuer to of its staff, the information furnished by the issuer to an	o furnish to the U.S. Sec	urities and E	Exchange Con	ımission, upon written	
	Print or Type) Yiew Partners B, L.P	Signature Present		Date ///	24/03	
	of Signer (Print or Type) G. Tynes	Title of Signer (Print or Managing Member Partner	• • /	iew B GP	LLC, the General	
		ATTENTION				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).